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APPLICANTS

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**** CONTINUING DATA ********"None"***** FOREIGN APPLICATIONS ********"None"***IF REQUIRED, FOREIGN FILING LICENSE GRANTED****** 09/18/2001**

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	<i>AV</i>		
Examiner's Signature	Initials		
STATE OR COUNTRY NY	SHEETS DRAWING 8	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 9

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TITLE

Authentic document and method of making

FILING FEE RECEIVED 1262	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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